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Dear Herbert,

I seem to have a day off--and I think there'll be many such this merry month of December, especially the last two weeks--and so I may respond to your lengthy letter of last month. I was very happy to read of adventures of another day, particularly of the fortunes of the firm of H. F. W. & Assocs. I am more concerned with the reports on your present status, however, which I pursued down to the last word in the postscriptum you've enclosed.

It always seems that you are caught between x-ray studies made at one time and gastric tests done at another, never quite catching up to a final conclusion from the concurrent result of both. Alas, how long is this to go on? You'd like to know, too, I think I hear you say. I think you are beginning to suspect that the pos. & neg. business is more the public health angle while data from x-ray films is more suggestive of the personal health aspect.

No, I have never submitted to the indignity of a gastric, nor will I ever--nor a bronchoscopy; I don't fancy the risk of punctures for the diagnostic data of dubious value. Anyway, back when this pos. & neg. finding seemed to mean something, why, they didn't have to dust the corners for my bugs; they could find 'em with a pocket magnifying glass. I have got away from x-ray film studies, too; they began to vary according to the reader. I hope you are not in this racket long enough to learn what a jungle of deception diagnosis becomes.

But I do glean something from your report of your reports, something I may discuss with you. Apparently, your cavitation doesn't wall off well, which can be desirable: that is, if you want to take surgery. For with collapse therapy you may then get a good falling in of the walls and the area will heal over. In my case I got no collapse; nature had been too efficient in walling off, and good lung tissue all around collapsed but not the cavities. From my thoracy I suffered all the disadvantages--spread on both sides, etc., etc., with no results.

Most cases are bilateral, to a degree; possibly the trouble on your "other" side can be disregarded.

As I see it, economically, they have you over a barrel. For you to go back to work, you must achieve certain standards of cure; at least you must be negative to the satisfaction of public health minded doctors. Smashing down the whole lung area by resecting ribs may close up the cavity and do the trick. I go into this explanation, I suppose, to justify my urging that you consider surgery. I don't minimize the unpleasantness of it, entering a san, etc., etc. But you do have reason to believe that you will get back on the job eventually. In private employment, after one is gone a couple of years or more, why it's different. For unexpected new reasons, or something, you don't ever get back, believe me. And whereever you seek employment these days, there is some sort of physical exam, and they have to want you very badly to accept you even with a healed up condition that was once bad enough to justify surgery. I know; that's why I work for myself.

I think you could have done better these past two years, but it never occurs to us in our early years with the plague to accept anything but regular medical advice and treatment (or lack of it). I realized long ago that I missed the boat, when I could have got excellent, lasting

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which results with drugless methods ~~that~~ I have subsequently learned. In the early months, or years, when the trouble is "fluid," that is, when it readily spreads or heals, then is the time for rational methods. Then resolution will take place, if guiding efforts are exerted. After degenerative changes have taken place, adaptations to living with the trouble so to speak, we face an irreversible stage.

Climate doesn't mean so much, 10% at the most they used to say. But I am lots happier here, and in the dry air, one doesn't feel his chest; there is no pressure as there always seems in a damp region. Anyway I had to escape the "smog" of Los Angeles which is something else again. We are still having summery weather; I get my daily sun baths, and it promises to be a better season than last year. I developed considerable bronchial irritation after the surgery, and such is many times the case. In such condition a dry climate is very favorable. It is a little high for me here; even 2400 ft. is high for one who has lost as much active lung tissue as I have; but by not walking very far or fast, it doesn't show up in difficult breathing. I may yet decide to remove to Phoenix where it is lower but somewhat more humid.

Old Sam Snead seems to be your Nemesis. Surely, that was the last straw when he managed to qualify as a registered, professional engineer. Yes, I think we could have made something of H. F. W. & Assocs. There were others who went into the consulting field and prospered, others who didn't have your full qualifications. You were over calibred for the police job. I recognized you as a radio engineer away back, and if we had had a little better break with the Count, with local stations in Milwaukee, and if the depression hadn't come on when it did, we might have both enjoyed different careers. But you have had a lot of security with the Police Dept. And this being in business for yourself has its ups & downs. And your civil service employment may tide you through the present crisis which under other types of occupation can be very unhappy, I assure you.

I was curious how the Tucson city fathers came out with their police radio job, and yesterday I phoned the city hall. They have six or ten applicants expecting to take the exam shortly. I see you still keep up your commercial operator's license. Well, when the worst comes, you can go back as "sparks" and check cars. I must tell D. V. about this; he never gets over telling about how you used to wear an unseagoing derby while going about your official duties, aboard the Kar Kennels.

The office management of such organizations as the I. R. E. eventually comes under the supervision of hired help; there is a woman office manager there from whom I get the brief brush off every time I make some inquiry. To such people it's just a job to be done according to their idea of efficiency, and that includes no conception of credit, as you found. I wouldn't take the rebuff so personally, if I were you.

I was up in WME as early as 1914, and I recall it used a stationary gap then, mounted inside the helix. Reading lately some De Forest history, it is significant to note that at the same tower--before Marconi took it over--he used an arc 'phone and a quenched gap spark, which shows how the established order always is behind progress, or at least takes lots of time to catch up. Industry seems to hold back inventions, roughly, just about 17 years, the life of a patent. Bill Arvin just went "over the hill." Most radio histories refer to Bill's life of De Forest which ran serially in Radio News many years ago.

Remember these recurrent symptoms of chest sensations, night sweats, etc. are probably sheer neurasthenia. What is your son doing, at Marquette yet?

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